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**\*BIBDATASHEET\***

Bib Data Sheet

CONFIRMATION NO. 1590

<b>SERIAL NUMBER</b> 10/663,445	<b>FILING OR 371(c) DATE</b> 09/16/2003 <b>RULE</b>	<b>CLASS</b> 215	<b>GROUP ART UNIT</b> 3734	<b>ATTORNEY DOCKET NO.</b> 460.2299USQ
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/272,475 10/16/2002 PAT 7,122,045  
 which is a CIP of 10/054,510 11/13/2001 PAT 6,645,228  
 This application 10/663,445  
 is a CIP of 09/906,320 07/16/2001 PAT 7,163,113  
 and is a CIP of 09/639,508 08/16/2000  
 which is a DIV of 09/209,070 12/10/1998 PAT 6,138,710

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 12/05/2003**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 33	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

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**TITLE**

VENTED BOTTLE

<b>FILING FEE RECEIVED</b> 1134	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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